TO: 18085870470



HAWAII STATE ETHICS COMMISSION

1001 Bishop Street, American Savings Bank Tower 970 P.O. Box 616, Honolulu, Hawaii 96809 Telephone: (808) 587-0460 FAX: (808) 587-0470 email: ethics@hawaiiethics.org web site: www.hawaii.gov/ethics

GIFTS DISCLOSURE STATEMENT						
(This report covers the	e period from June 1 of the preceding calendar year through June 1 of	of this year and is due on June 30)				
Susan Jackson		•	state position: Deputy Director			
STATE AGENCY: Depar	tment of Health		J -4412			
STATE MAILING ADDRESS: 1250 Pur	ichbowl Street, Third Floor 14 HI 96813					
1 DONOR	2 DESCRIPTION OF GIFT	DATE 3 REC'D	GIFT 4 VALUE	AGG. 5 VALUE		
	Nothing to report					

1 DONOR	2 DESCRIP	PTION OF GIFT	DATE 3 REC'D	GIFT 4 VALUE	AGG. 5 VALUE
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		STATE OF HAWAII STATE ETHICS COMMISS	10}		
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Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Sura Jetion

6/23/06

DATE